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CONFIRMATION NO. 5037

<b>SERIAL NUMBER</b> 10/664,645	<b>FILING OR 371(c) DATE</b> 09/19/2003 <b>RULE</b>	<b>CLASS</b> 220	<b>GROUP ART UNIT</b> 3727	<b>ATTORNEY DOCKET NO.</b> 86012-34000-USPT
<b>APPLICANTS</b> Kate E. Nordland, Rochester, NY; <b>** CONTINUING DATA *****</b> <i>None</i> <i>JWS</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None</i> <i>JWS</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 12/11/2003</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> <i>JWS</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 74
<b>INDEPENDENT CLAIMS</b> 12				
<b>ADDRESS</b> 28763				
<b>TITLE</b> Leak-resistant polymeric foam containers				
<b>FILING FEE RECEIVED</b> 2478	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	